

Exhibit N 05 Report -- RSN -- State Funded Individuals Only

RSN Name _____ Contact Name: _____ Reporting Period: _____
 Contact Phone #: _____ (Month and Year)

Total Unduplicated Number of Adult Cases

Total Unduplicated Number of Children Cases

Occurrence	CMHA Grievances	PRSN Grievances	Fair Hearings	Outstanding
Adult (21 Yrs. and over)				
Access				
Dignity and Respect				
Quality/ Appropriateness				
Phone calls not returned				
Service -- Intensity, Not Available, Coordination				
Consumer Rights				
Physicians & Medications				
Financial & Admin Svs				
Residential				
Housing				
Transportation				
Emergency Services				
Violation of Confidentiality				
Participation in Treatment				
Other				
Total	0	0	0	0

Occurrence	CMHA Grievances	PRSN Grievances	Fair Hearing	Outstanding
Children (0-20 Yrs.)				
Access				
Dignity and Respect				
Quality/ Appropriateness				
Phone calls not returned				
Service -- Intensity, Not Available, Coordination				
Consumer Rights				
Physicians & Medications				
Financial & Admin Svs				
Residential				
Housing				
Transportation				
Emergency Services				
Violation of Confidentiality				
Participation in Treatment				
Other				
Total	0	0	0	0

Resolutions	CMHA Grievances	PRSN Grievances	Fair Hearings	Outstanding from Last Period
Adult (21 Yrs. and over)				
Info/Referral				
Referral to QRT				
Conciliation/Mediation				
Arbitration				
Fair Hearing				
Other				
Not Pursued				
Total	0	0	0	0

Resolutions	CMHA Grievances	PRSN Grievances	Fair Hearing	Outstanding from Last Period
Children (0-20 Yrs.)				
Info/Referral				
Referral to QRT				
Conciliation/Mediation				
Arbitration				
Fair Hearing				
Other				
Not Pursued				
Total	0	0	0	0